

Effectiveness of Counseling on the Willingness to Use Intra-Uterine Device Contraceptive after Placenta Detachment among the Health Insurance Participants in Panembahan Hospital, Bantul

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ABSTRACT

Background: Counseling on family planning and contraceptive use after delivery may increase awareness of women to use contraceptives. Any use of contraceptives there are side effects, including in the use of contraceptives used in the uterus post placenta, side effects and failure was a factor that caused the acceptors are having dropped out of the methods used. This study aimed to determine the effectiveness of counseling on willingness to use intra-uterine device contraceptive after delivery.

Subjects and Method: This was a qualitative study with case studies carried out in Bantul Yogyakarta. A total of 3 midwives and 3 contraceptive use in the uterus post placenta acceptor Panembahan Senopati hospital. The dependent variable was health insurance participant. The independent was contraceptive used in the uterus post placenta. The data collected by interview, observation, document. The informant was 3midwifery and 3 acceptor of post placenta.

Results: Socialization and counseling is done always accompanied and informed consent when the pregnancy inspection. Midwives play a role in counseling process by involving the husband as support for potential acceptors. Such side effects are still within the limits of reasonable expulse. Contraceptives used in the uterus post placenta installation carried out by a competent midwife by SPO. Midwives provide education and counseling reset when the client still complained of side effects.

Conclusion: Socialization and counseling potential acceptors are effective to increase willingness to use intra-uterine device contraceptive among the health insurance participants.

Keywords: counseling, intra-uterine device contraceptive

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BACKGROUND

The main problem faced by Indonesia in demography is the high population growth rate. The higher population growth rate is the bigger effort should be conducted to maintain the welfare of its citizen. The threat of population explosion in Indonesia is getting real. It is seen in the range of 10 years, the number of population in Indonesia is increasing as much as 32.5 million from 2015.1 million in 2000 turns into 237.6 million in 2010 (BKKBN, 2010).

Government keeps on attempting to restrain the growth rate with Family Planning program. Family Planning program is an integrated part of national development and aims to participate in creating welfare for Indonesian citizen to attain excellent balance (Depkes RI, 2006). The implementation of advocacy and Information, Education, Communication (IEC) is not yet effective which is marked by knowledge on birth control and contraceptives is very high (98% out of Couples of Reproductive

Age), however it is not followed by behavior to become KB participants which is 57.9%. Unmet need for contraceptives is still high, that is 8.5% or 11.4%, in the other hand contraceptive drop-out rate is still high, that is 27.1% (BKKBN, 2015).

Intra Uterine Device (IUD) is one of contraceptives, which is included in post partum contraceptives. It means contraceptives which can be directly inserted at 10 minutes after placenta detachment. The insertion of the contraceptive is considered beneficial for certain reasons, such as at this period of time the woman does not intend to get pregnant and her motivation to use contraceptive is still high (Grimes et al., 2010).

Counseling on birth control and contraceptive methods during post partum period can increase maternal awareness to use contraceptives (USAID, 2008). It happens since some women after giving birth usually do not intend to get pregnant or intend to postpone the pregnancy up to 2 years subsequent to giving birth, however they do not use any contraceptives (*unmet need*) (Widyastuti, 2010).

Post placenta IUD method possesses its own advantage, in addition to more effective insertion since it is carried out after placenta detachment, it also simultaneously reduces maternal pain scale. The result of expert meeting in 2009 conveys that the use of post placenta and post abortion should be encouraged since it is very effective (BKKBN, 2010).

Law on BPJS 2014 enacts Health Preventive Effort in the 3rd point about Family Planning, especially explain about counseling on Long Term Contraceptive Methods. Long Term Contraceptive Method program continues after it is successfully implemented in PKBRS (Hospital Family Planning Service Program) that is in collaboration with Childbirth insurance

program (Jampersal) and it continues up to currently in Social Health Insurance (Jamkesmas) and General National Health Insurance (BPJS)

For each use of contraceptive is followed by side effect, including the use of IUD. Side effects and failures are factors that cause acceptors experience drop-out from the method they use. Drop-out on acceptor is discharging acceptor from contraceptive method because of various reasons, such as failure (pregnancy during contraceptive use or intentionally getting pregnant for having another child) or because they switch to other contraceptives since acceptor experience disturbing side effects (Sumarwan dan Ernawati, 2006).

The possible side effect are a change to menstruation cycle (generally within the first 3 months and will be reduced after 3 months), heavier and longer menstruation, spotting between menstruations, and more painful period (Saifuddin, 2006). The possible complications that may happen are among others uterine perforation, infection, pregnancy with IUD in uterine and ectopic pregnancy (Levono, 2011). Some hazardous sign in the use of IUD are the absence of menstrual bleeding (amenorrhea), prolonged stomach pain, high fever and shivering, heavy and smelly leucorrhea, heavy period with the presence of blood (Hartanto, 2008).

Penambahan Senopati Regional General Hospital is one of the Regional General Hospital that becomes the target of Hospital Family Planning Service development. Based on the preliminary study on January 25, 2016 there were data on new acceptors of post placenta IUD in 2015 period as many as 757 (most of them were users of health insurance) expulsion incidence were as many as 53 acceptors.

SUBJECTS AND METHODS

The study was a qualitative study with case study approach which was conducted in Panembahan Senopati Regional General Hospital Bantul. Data collection was carried out by doing in depth interview, observation, and document study. The informants were 3 midwives and 3 acceptors of post placenta IUD as the main key of the study.

RESULT

Socialization and counseling of post placenta IUD contraceptive was always carried out by midwives during the pregnancy examination (ANC). In the implementation, the side effect in a form of expulsion was still within normal limit, however there were acceptors who complained on the side effects which were normal in nature (physiology)

DISCUSSION

The high drop out rate in the use of contraceptives turned to be the spotlight of government. Therefore, the government formulated a policy that was promoting the use of long term contraceptives so that it was expected that the use of the contraceptives would last sustainably.

The result of the study mentioned that women of reproductive age who were involved in the study were more than 30 years old and were likely to select long term contraceptive method. It was supported by the purpose and reasons in using contraceptives. In the age of more than 30 years old commonly the number of children is 2 or even more, therefore they had their own purpose or reason in using contraceptives to stop, postpone or not getting pregnant anymore. Besides, the other reasons of long term contraceptive method were since it

was more practice, safe, economical, and long term.

Socialization and counseling had been carried out during pregnancy examination in Polyclinic Obstetric and Gynecology. Informed consent was also supplemented as the approval evidence. Midwives played a big role in doing counseling on prospective acceptors. Counseling always involved the husbands as the support in making decision.

The incidence of expulsion or the ejection of IUD was still within normal limit, the incidence was influenced by high parity and the inappropriate insertion on fundus, however what was conveyed by midwives was not yet in accordance with the existing theory. Besides, there were acceptors who are afraid of post placenta IUD's side effects. The ailments conveyed were still in term of physiology or normal. There was no occurrence of perforation. Standard Operational Procedure of post placenta IUD insertion has been set, in which the insertion is carried out by competent midwives and have been trained, the midwives also recognize the proper time to conduct insertion.

Complication management is conducted by re-education if the client is still complaining about side effects, midwives will also evaluate the causes and conduct an observation prior to the re-insertion of IUD if the expulsion occurs.

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